FORM APPROVED OMB NO. 2900-0445

REQUEST FOR QUOTATIONS		THE NOTICE OF SMALL BUSINESS-SMALL PURCHASE SET-ASIDE ON THE REVERSE OF THIS FORM APPLICABL NOT APPLICABLE				PAGE OF PAG	ES
(THIS IS NOT AN ORDER) 1. REQUEST NO. 2.1		2. DATE ISSUED	3. REQUISITION/PURCHASE REQUEST NO.		. CERT. FOR NAT. DEF. UNDER BDSA REG. 2	RATING	
5A. ISSUED BY			NO.		AND/OR DMS REG. 1	•	
SA. ISSUED BY				°	. DELIVER BY (Date)		
5B. FOR INFORMATION CALL: (Name and telephone no.)(No collect calls)				7	. DELIVERY		
					FOB	OTHER	
8. TO: NAME AND ADDRESS, INCLUDING ZIP CODE				9	DESTINATION DESTINATION (Consignee and	address, including ZIP Code)	
10. PLEASE FURNISH QUOTATIONS TO THE 11. BUSINESS CLASSIFICATIONS			ON (Check appropriate boxes)				
ISSUING OFFICE ON OR BEFORE CLOSE OF BUSINESS (Date)			OTHER THAN SI		ALL	WOMAN-OWNED	
		VETERAN-OWNED DISADVANTAGED	□ vietr	NAM ERA VE	TERANS-OWNED	DISABLED VETERAN-OV	VNED
IMPORTA	NT: This is a request for informa						
IMPORTANT: This is a request for information, and quotations furnished are not offers. If you are unable to quote, please so indicate on this form and return it. This request does not commit the Government to pay any costs incurred in the preparation of the submission of this quotation or to contract for supplies or services. Supplies are of domestic origin unless otherwise indicated by quoter. Any representations and/or certifications attached to this Request for Quotations must be completed by the quoter.							
quoter.		12. SCHEDULE (Inc	clude applicable Federal, Sta	te and loca	l taxes)		
ITEM NO. (a)	SUPPLIES/SE	RVICES	QUANTITY	UNIT (d)	UNIT PRICE	AMOUNT	
(a)	(b)		(c)	(u)	(e)	(f)	
13. DISCOUNT FOR PROMPT PAYMENT 10. CALENDAR DAYS			20 CALENDAR DAYS	30 CALEND		CALENDAR DAYS	64
NOTE: Reverse must also be completed by the quoter.			%	<u> </u>	%		%
	ADDRESS OF QUOTER (Street, city, co		15. SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION			16. DATE OF QUOTATION	
				i e			
			17. NAME AND TITLE OF SIGNE	R (Type or Pri	nt)	18. TELEPHONE NO. (Include area code)	

REPRESENTATIONS, CERTIFICATIONS, AND PROVISIONS

The following representation applies when the contract is to be performed inside the United States, its territories or possessions, Puerto Rico, the Trust Territory of the Pacific Islands, or the District of Columbia.

52.219-1 small business concern representation (Feb 90)

The quoter represents and certifies as part of its quotation that it is, is not a small business concern and
that \square all, \square hot all end items to be furnished will be manufactured or produced by a small business concern in the United
States, its territories or possessions, Puerto Rico, or the trust territory of the Pacific Islands. "Small business concern," as
used in this provision, means a concern, including its affiliates, that is independently owned and operated, not dominant in the
field of operation in which it is bidding on Government contracts, and qualified as a small business under the criteria and size
standards in 13 CFR 121.

The following provision is applicable if required on the face of the form:

52.219-4 Notice of Small Business-Small Purchase Set-Aside (Aug 88)

Quotations under this acquisition are solicited from small business concerns only. Any acquisition resulting from this solicitation will be from a small business concern. Quotations received from concerns that are not small businesses shall not be considered and shall be rejected.

Definitions for Item 11 on the face of this form:

- **a. Veteran-owned business -** A business that is at least 51 percent owned by a veteran(s), who also controls and operates the business. Control in this context means exercising the power to make policy decisions. Operate in this context means actively involved in day-to-day management. For the purpose of this definition, veteran means a person who served in the U.S. Armed Forces and was discharged or released under conditions other than dishonorable.
- **b.** Vietnam era veteran-owned business A business that is at least 51 percent owned by a person(s), who served for a period of more than 180 days, any part of which was between August 5, 1964, and May 7, 1975, and was discharged other under conditions other than dishonorable.
- **c. Disabled veteran-owned business -** A business that is owned by a person(s) with a minimum compensable disability of 30 percent, or who was discharged for disability.
- **d. Disadvantaged business -** A business that is at least 51 percent owned by one or more individuals who are both socially and economically disadvantaged individuals and that has it management and daily business controlled by one or more such individuals.
- **e.** Woman-owned business A business that is at least 51 percent owned by a woman or women who are U.S. citizens and who also control and operate the business.

Responding to Item 11 (Veteran-Owned Business, Vietnam Era-Owned Business, or Disabled Veteran-Owned Business) is voluntary and approved under OMB Number 2900-0445. The information will be used to assure that efforts are being made in VA to identify veteran business concerns, and to monitor accomplishments and to conduct customer surveys. Public reporting burden for this additional collection of information is estimated to average 15 seconds per response.